

**TOWN OF RAYMOND**  
**PUBLIC WORKS DEPARTMENT**  
**Water Division**  
**Water Service Application**  
**(603)895-4657**

**Applicant will adhere strictly to Raymond Water Division's "Rates, Rules and Regulations." Work done prior to permitting and/or inspection will result in double fees and may result in additional penalties. The applicant will hire a reputable contractor who is approved by the Town's Public Works Director to complete all necessary work. Applicant understands and agrees that the work requested is his complete financial responsibility.**

***Owner's Info:***

Owner's Name: \_\_\_\_\_ Owner's Cell phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Owner's Home Phone: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Property Location: \_\_\_\_\_ Tax Map No: \_\_\_\_\_ Lot: \_\_\_\_\_

***Contractor's Info***

Contractor's Name: \_\_\_\_\_ Cont. Cert. Ins. Provided: Yes \_\_\_\_\_ No \_\_\_\_\_  
Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Dig Safe No: \_\_\_\_\_ Date dig safe # is good: \_\_\_\_\_  
Roadway Opening Permit: Yes \_\_\_\_\_ No \_\_\_\_\_ Attach Sketch of Service Location: Yes \_\_\_\_\_ No \_\_\_\_\_

***Service Info:***

Service size: \_\_\_\_\_ New: \_\_\_\_\_ Replacement: \_\_\_\_\_  
Service type: Commercial: \_\_\_\_\_ Residential: \_\_\_\_\_ Industrial: \_\_\_\_\_ Fire: \_\_\_\_\_  
Replace. or New Serv.: \_\_\_\_\_ Service Size requested: \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**New water check sheet given to applicant: yes \_\_\_\_\_ no \_\_\_\_\_ completed: \_\_\_\_\_**

Approved: \_\_\_\_\_ Date: \_\_\_\_\_  
Inspected: \_\_\_\_\_ Date: \_\_\_\_\_  
Completed: \_\_\_\_\_ Date: \_\_\_\_\_